



15253

Patent

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
)
 David A. G. Deacon) Examiner: Jackson, C.
)
 Serial No. 09/434,575) Art Unit: 2828
)
 Filed: November 4, 1999)
)
For: METHOD OF MAKING CHANNEL-ALIGNED)
 RESONATOR DEVICES)

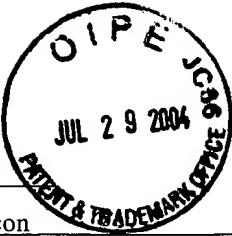
Mail Stop Amendment
Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AND REQUEST FOR RECONSIDERATION

Sir:

Responsive to the Office Action mailed March 26, 2004, the Applicant request the Examiner to enter the following amendment under 37 CFR 1.116 and to reconsider all pending claims in view of the amendment and the following remarks.

It is not believed that extensions of time are required beyond those that may otherwise be provided for in documents accompanying this paper. However, if additional extensions of time are necessary to prevent abandonment of this application, then such extensions of time are hereby petitioned under 37 C.F.R. §1.136(a), and any fees required therefore are hereby authorized to be charged to Deposit Account No. 02-2666. Please credit any overpayment to the same deposit account.



Attorney's Docket No.: 42P15253

Patent

In re the Application of: David A.G. Deacon

(inventor(s))

Application No.: 09/434,575

Filed: November 4, 1999

For: METHOD OF MAKING CHANNEL-ALIGNED RESONATOR DEVICES
(title)

Mail Stop Amendment

COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450

SIR: Transmitted herewith is a Response and Amendment for the above-referenced application.

 Applicant claims small entity status. See 37 CFR 1.27.

XX **No additional fee for claims is required.**

XX **A check for a one-month extension of time is enclosed.**

The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)		SMALL ENTITY	OTHER THAN A SMALL ENTITY
	Claims Remaining After Amd.		Highest No. Previously Paid For	Present Extra		Rate	Additional Fee
Total Claims	* 17	Minus	** 51	0		X9	\$
Indep. Claims	* 1	Minus	*** 3	0		X43	\$
First Presentation of Multiple Dependent Claim(s)						+145	\$
					Total Add. Fee	\$	

* If the entry in Col. 1 is less than the entry In Col. 2, write "0" in Col. 3.

** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

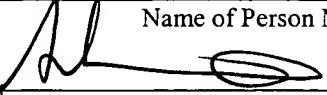
CERTIFICATE OF MAILING BY FIRST CLASS MAIL (if applicable)

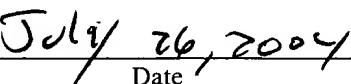
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450

on July 26, 2004
Date of Deposit

Adrian Villarreal

Name of Person Mailing Correspondence


Signature


Date

A check in the amount of \$ _____ is attached for presentation of additional claim(s).
 Applicant(s) hereby Petition(s) for an Extension of Time of one month(s) pursuant to 37 C.F.R. § 1.136(a).

A check for \$ _____ is attached for processing fees under 37 C.F.R. § 1.17.

Please charge my Deposit Account No. 02-2666 the amount of \$ _____.

A duplicate copy of this sheet is enclosed.

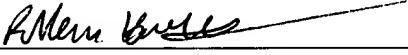
The Under Secretary of Commerce for Intellectual Property and Director of the United States Patent and Trademark Office is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 02-2666 (**A duplicate copy of this sheet is enclosed**):

Any additional filing fees required under 37 C.F.R. § 1.16 for presentation of extra claims.

Any extension or petition fees under 37 C.F.R. § 1.17.

BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP

Date: July 26, 2004


R. Alan Burnett
Reg. No. 46,149

12400 Wilshire Boulevard
Seventh Floor
Los Angeles, California 90025
(206) 292-8600